

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Ma</i>	<i>62814</i>	<i>7/13/02</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>AT</i>	<i>JC 832</i>	<i>8-23-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
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14	✓	✓	
15	✓	✓	
16	✓	✓	
17	✓	✓	
18	✓	✓	
19	✓	✓	
20	✓	✓	
21	✓	✓	
22	✓	✓	
23	✓	✓	
24	✓	✓	
25	✓	✓	
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27	✓	✓	
28	✓	✓	
29	✓	✓	
30	✓	✓	
31	✓	✓	
32	✓	✓	
33	✓	✓	
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35	✓	✓	
36	✓	✓	
37	✓	✓	
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45	✓	✓	
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47	✓	✓	
48	✓	✓	
49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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